

Small

PATENT APPLICATION FEE DETERMINATION RECORD

Effective October 1, 2003

Application or Docket Number

10/786608

CLAIMS AS FILED - PART I

	(Column 1)	(Column 2)
TOTAL CLAIMS	32	
FOR	NUMBER FILED	NUMBER EXTRA
TOTAL CHARGEABLE CLAIMS	32 minus 20 =	* 12
INDEPENDENT CLAIMS	17 minus 3 =	* 14
MULTIPLE DEPENDENT CLAIM PRESENT <input type="checkbox"/>		

SMALL ENTITY
TYPE ☐OR OTHER THAN
SMALL ENTITY

RATE	FEE
BASIC FEE	385.00
X\$ 9=	108
X43=	602
+145=	8
TOTAL	1095

RATE	FEE
BASIC FEE	770.00
X\$18=	
X86=	
+290=	
TOTAL	

* If the difference in column 1 is less than zero, enter "0" in column 2

CLAIMS AS AMENDED - PART II

	(Column 1)	(Column 2)	(Column 3)
AMENDMENT A	CLAIMS REMAINING AFTER AMENDMENT	HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA
Total	*	Minus **	=
Independent	*	Minus ***	=
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM <input type="checkbox"/>			

SMALL ENTITY
OROTHER THAN
SMALL ENTITY

RATE	ADDITIONAL FEE
X\$ 9=	
X43=	
+145=	
TOTAL	
ADDITIONAL FEE	

RATE	ADDITIONAL FEE
X\$18=	
X86=	
+290=	
TOTAL	
ADDITIONAL FEE	

1. 2. 3. 4. 7. 8. 9. 10. 11. 13. 14. 15. 16. 18. 19. 20.
22.

| | (Column 1) | (Column 2) | (Column 3) |
|---|----------------------------------|------------------------------------|---------------|
| AMENDMENT B | CLAIMS REMAINING AFTER AMENDMENT | HIGHEST NUMBER PREVIOUSLY PAID FOR | PRESENT EXTRA |
| Total | * | Minus ** | = |
| Independent | * | Minus *** | = |
| FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM <input type="checkbox"/> | | | |

| RATE | ADDITIONAL FEE |
|----------------|----------------|
| X\$ 9= | |
| X43= | |
| +145= | |
| TOTAL | |
| ADDITIONAL FEE | |

| RATE | ADDITIONAL FEE |
|----------------|----------------|
| X\$18= | |
| X86= | |
| +290= | |
| TOTAL | |
| ADDITIONAL FEE | |

| | (Column 1) | (Column 2) | (Column 3) |
|---|----------------------------------|------------------------------------|---------------|
| AMENDMENT C | CLAIMS REMAINING AFTER AMENDMENT | HIGHEST NUMBER PREVIOUSLY PAID FOR | PRESENT EXTRA |
| Total | * | Minus ** | = |
| Independent | * | Minus *** | = |
| FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM <input type="checkbox"/> | | | |

| RATE | ADDITIONAL FEE |
|----------------|----------------|
| X\$ 9= | |
| X43= | |
| +145= | |
| TOTAL | |
| ADDITIONAL FEE | |

| RATE | ADDITIONAL FEE |
|----------------|----------------|
| X\$18= | |
| X86= | |
| +290= | |
| TOTAL | |
| ADDITIONAL FEE | |

* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.

** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20."

*** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."

The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.